



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 7251

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | |
|---|---|-------------------------------|------------------------------|---|--------------------------------|
| 10/697,410 | 10/30/2003 RULE | 705 | 3626 | 26893/82693 | |
| APPLICANTS G. Michael Higgins, Fort Wayne, IN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/28/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KRISTINE K RAPILLO/ Acknowledged Examiner's signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY IN | SHEETS DRAWINGS 36 | TOTAL CLAIMS 46 | INDEPENDENT CLAIMS 4 |
| ADDRESS OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, L.L.P. 1940 DUKE STREET ALEXANDRIA, VA 22314 UNITED STATES | | | | | |
| TITLE Automated system and method for evaluating insurable risks at point of sale | | | | | |
| FILING FEE RECEIVED 1506 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |